



Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				<i>Complete if Known</i>	
				Application Number	To Be Assigned
				Filing Date	Herewith
				First Named Inventor	COMBS
				Group Art Unit	To Be Assigned
				Examiner Name	To Be Assigned
				Attorney Docket Number	113692CON-2 (ATT.0020004)
Sheet	1	of	1		

[illegible][illegible]

Examiner Signature	<i>Nashwan</i>	Date Considered	10/28/04
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³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3).